

Pick Up & Emergency Form

Child's Name: _____

I authorize the following person(s) to pick up my child from school. I understand that if someone other than the individuals listed below should pick up my child, I will notify the school by way of a written document.

1: _____ 2: _____

3: _____ 4: _____

5: _____ 6: _____

Please list 3 people in which we may contact for emergency purposes:

1: _____ Phone: _____

2: _____ Phone: _____

3: _____ Phone: _____

Parent of Guardian Signature

Date